Village of Sleepy Hollow Department of Parks and Recreation 28 Beekman Avenue, Sleepy Hollow, New York 10591 (914) 366-5109



Fee Received:
Deposit Received:

ID Received:

Approval Signature:

Village of Sleepy Hollow Park Permit Kingsland Park Gazebo

	Kingsland Park Gazebo
Person Requestin	g Permit:
Organization (if applicable):	
Type of party/event:	
Contact information for person requesting permit:	
Address:	
City/State/Zip:	
Phone number:	
Day and Date of Event:	
Start and End Times:	
Number of Participants: (not to exceed 100 persons)	
Permit Fee:?	Deposit: \$500 — payable by cash, money order or certified check
Application Proc	edures:
	ete all the information requested above.
-	esting the permit must submit a copy of a valid photo ID eg: se. Person requesting permit must be a resident of Westchester
Sleepy Hollo	wments, for permit and deposit, made payable to The Village of w and mail completed application with checks and a copy of a the above address.
*	above items are not received with the application the request will
Terms and Condi	tions:
=	older will be held responsible for any damages to park property ing the event.
	g regulations and ordinances must be observed: nplified music allowed in the parks
	illage/County parks close at dusk
o Perm	is are limited to the number of people indicated above it holder is responsible for ensuring the area is left in a reasonable, is free condition with trash deposited in the proper receptacles.
• Failure to ab	ide by any of the above terms and conditions will result in the g forfeited and/or the termination of the event by the Sleepy
= =	ee Department.
Ι	agree to terms and Conditions as indicated above.
Signatu	re Date
Office Has Only	
Office Use Only Date Received:	

